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Country programme document for Armenia

Proposed indicative UNFPA assistance:	$3.6 million: $2.0 million from regular resources and $1.6 million through co-financing modalities and/or other resources, including regular resources
Programme period:	Five years (2016-2020)
Cycle of assistance:	Third
Category per decision 2013/31:	Pink

Proposed indicative assistance (in millions of $):

Strategic plan outcome areas		Regular resources	Other resources	Total
Outcome 1	Sexual and reproductive health	0.55	0.5	1.05
Outcome 2	Adolescents and youth	0.3	0.3	0.6
Outcome 3	Gender equality and women's empowerment	0.4	0.5	0.9
Outcome 4	Population dynamics	0.45	0.3	0.75
Programme coordination and assistance		0.3	–	0.3
Total		2.0	1.6	3.6

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Please recycle

I. Situation analysis

1. Armenia is a landlocked country in the South Caucasus with an area of 29,743 square kilometres and population of 3.02 million. It is a lower-middle-income country undergoing political, economic and social transition.

2. During the first decade of independence (1991-2001), high unemployment and the Nagorno-Karabakh conflict forced a quarter of the population to leave Armenia. Remittances from migrant workers grew by 11 per cent in 2012, constituting 14 per cent of gross domestic product. Unemployment affects a significant portion of the labour force, with rates especially high outside the capital and among youth and women.

3. Armenia ranked high in the 2013 human development index, with a value of 0.730, positioning the country at 87 out of 187 countries and territories. In 2013, the gross national product per capita was $3,790. Some 32.4 per cent of the overall population was poor in 2013, compared to 27.6 per cent prior to the crisis in 2008.

4. The Constitution guarantees human rights protection and non-discrimination, including for gender. The country is party to all nine United Nations human rights treaties and most of the additional protocols. The reports for international treaty bodies indicate systematic delays in the realization of these rights.

5. The Republic of Armenia became a member of Euro-Asian Economic Union on 1 January 2015. Armenia continues its cooperation with European Union a wide range of areas, from political dialog to human rights, from justice to mobility and migration to institutional reforms and capacity building. Its border with Turkey remains closed, and Turkey refuses to establish diplomatic relations. This situation compounds the challenge of a landlocked state and constrains its development. Peaceful resolution of the Nagorno-Karabakh conflict is negotiated under the internationally agreed format of the Organization for Security and co-operation in Europe (OSCE) Minsk group.

6. The total fertility rate is 1.57 children per woman in 2013, compared to 1.31 children per woman in 2000. During the last decade, the maternal mortality ratio has decreased; in 2013, it was 18.8 per 100,000 live births. The proportion of married women who use modern contraceptive methods increased from 22 per cent in 2000 to 27 per cent in 2010 (data based on the latest Demographic and Health Survey). There is a steady decrease in the use of traditional methods, from 37 per cent in 2000 to 28 per cent; however, the unmet need is still high, at 21 per cent. The abortion rate has decreased from 1.8 per live birth in 2005 to 0.8 per live birth in 2010. Although the prevalence of HIV/AIDS in Armenia is low, there is a risk that it can be aggravated.

7. Young people aged 10-24 years constitute 22.2 per cent of the population; they are affected by high unemployment rates, 64 per cent for females and 62.3 per cent for males. The policies do not adequately address the needs of adolescents and youth, including in sexual and reproductive health. Reliable knowledge of sexual and reproductive health is poor. During the past two decades, adolescent fertility fell considerably, declining from 69.1 live births per 1,000 women aged 15-19 years in 1990 to 22.7 live births per 1,000 women aged 15-19 years in 2013.

8. Gender equality is a challenge in Armenia, particularly for the economic and political participation of women (11 per cent of parliament members), and in addressing gender-based violence and discrimination. Policy instruments that have been developed are yet to be implemented. According to the Gender Gap Index published in 2014, Armenia ranks 103 out of 136 countries — a reversal of the progress made earlier. The male-to-female sex ratio at birth rose after 1991; it remains at a very high level (113 males per 100 females in 2013), indicating the practice of gender-biased sex selection in the country.

9. In 2012, the average life expectancy was 70.9 years for males and 77.5 years for females. More than 10 per cent of the population is over the age of 65 years; this age group is estimated to reach 22 per cent by 2050. The social protection systems require extensive overhaul since they are not well targeted or socially equitable. The national strategy on ageing and its action plan have been adopted; however, services for elderly people are lacking in the country, as reflected in 2013 World Ageing Index, where Armenia ranked 51 out of 91 countries.

II. Past cooperation and lessons learned

10. The second country programme (2010-2015) focused on three areas: (a) sexual and reproductive health, (b) gender equality and gender-based violence, (c) development of evidence-based population strategies. Youth issues were cross-cutting for all the three programme components.

11. The 2014 country programme evaluation highlighted a number of achievements: (a) high relevance of the programme to the needs of the Armenian population; (b) successful leverage of funds; (c) significant added value to the United Nations country team, government and other partners; (d) awareness raising on prenatal sex selection and advocacy to address the problem; and (e) total market approach to create equitable access to contraceptives.

12. The evaluation provided relevant recommendations for the next country programme: (a) advocating for the most vulnerable groups; (b) strengthening partnerships for policy advocacy and resource mobilization; (c) fostering support of the private sector and Armenian diaspora for gender equality and youth interventions, particularly in rural areas; (d) supporting the establishment of an integrated information centre to promote demographic data collection and analysis; (e) and developing a sustainable strategy to advance the International Conference on Population and Development.

13. The main lessons learned were that working on focused issues, such as prenatal sex selection or total market approach, helps to widen the cooperation with different stockholders, including the media and religious organizations, and facilitates strong advocacy in these areas. At the same time, particularly in the context of middle-income countries, it has become clear that there is a strong need to work toward institutionalization and sustainability of the processes in support of UNFPA mandate.

III. Proposed programme

14. The proposed third country programme will contribute to the national strategic priorities, the post-2015 development agenda, the outcomes of UNFPA Strategic Plan 2014-2017 and the United Nations Development Assistance Framework 2016-2020, as well as the priorities identified during stakeholder consultations. UNFPA and the Government developed the programme through a participatory approach, in consultation with civil society and in line with the analysis of current situation. The programme has four components: (a) sexual and reproductive health; (b) adolescents and youth; (c) gender equality and reproductive rights; and (d) population dynamics.

15. The programme will shift from service delivery to more upstream policy work, building on effective approaches for the middle-income countries, such as brokerage, advocacy and policy dialogue. To enhance its impact, the programme employs a comprehensive approach, integrating maternal health, gender and youth issues, in midwifery interventions.

16. UNFPA will continue to partner with government and civil society actors, United Nations organizations and donors. The programme will work on a transformative development agenda that is universal, inclusive, human rights based, integrated and anchored in the principle of equality. Key programming strategies are advocacy, policy dialogue/advice and generating evidence for policy development. All proposed interventions reinforce the Government programmes in relevant sectors.

A. Outcome 1: Sexual and reproductive health

17. Output 1: Increased capacity of national institutions to develop evidence-based policies and implementation mechanisms for high-quality integrated sexual and reproductive health services for women, adolescents and youth, with a focus on vulnerable groups, including in humanitarian settings. Reproductive and maternal health is among the five priorities of the Government's political programme for 2013-2018. In line with the national strategy 2007-2015 and the programme action plan on reproductive health, the UNFPA interventions will aim to reduce inequities and focus on enabling equitable access to high-quality integrated reproductive health services, including HIV, for vulnerable groups.

18. It will address unmet need for family planning through advocacy and technical support: (a) generating evidence to inform costed sexual and reproductive health policies with implementation mechanisms; (b) developing guidelines on sexual and reproductive health standards of care for all; (c) improving knowledge and skills of vulnerable groups for safe sexual and reproductive behaviour; (d) advancing midwifery education system in line with international standards; and (e) developing regional preparedness plans that include provision of the Minimum Initial Service Package for Reproductive Health in humanitarian settings; and (f) Establishing a family planning logistics system to insure contraceptive security.

B. Outcome 2: Adolescents and youth

19. Output 1: Strengthened national laws, policies and programmes for incorporating adolescent and youth rights and needs through evidence-based policy advocacy. The programme will focus on advocacy, policy advice, and technical support for: (a) developing and implementing gender-sensitive sexual and reproductive health and rights-related policies and strategies for youth, with a focus on youth with disabilities; (b) establishing participatory advocacy platforms for increased involvement of marginalized adolescents and youth; (c) strengthening peer education programming; (d) revising teaching content and methodology for school-based healthy lifestyle education curricula; and (e) generating evidence on the sexual and reproductive health needs of young people.

C. Outcome 3: Gender equality and women's empowerment

20. Output 1: Strengthened capacity of national institutions on policy development and implementation to promote gender equality and prevent harmful practices. The programme will promote gender equality and empowerment of women, and combat gender-based violence, in line with the recommendations of human rights bodies. This will be achieved by (a) generating evidence and analysing the effects of gender-based violence on women and girls, including their reproductive health and social and economic participation; (b) advocating for improvement and implementation of gender-sensitive legislation and institutionalization of policies and programmes for promoting gender equality and improved response to gender-based violence; (c) strengthening the capacity of multiple sectors to

address gender-based violence; and (d) promoting gender-transformative approaches and supporting engagement of men and boys to address gender inequality and gender-based violence.

D. Outcome 4: Population dynamics

21. Output 1: Increased availability of evidence for formulation of rights-based policies on emerging population issues (low fertility, ageing, migration) and their linkages to sustainable development. This will be achieved through advocacy, policy advice and technical support, focusing on (a) generation of data collection, analysis, dissemination and use for informed policy development; (b) supporting establishment of accessible web-based platforms to reflect socio-economic and demographic inequalities; and (c) utilizing the emerging opportunities brought by the data revolution and big data in support of population and sustainable development policies.

IV. Programme management, monitoring and evaluation

22. The Ministry of Foreign Affairs will coordinate the country programme implementation using national execution modality, in line with the rights-based and results-based programming approach. UNFPA will collaborate with government entities and civil society, including faith-based organizations, to implement its programme, focusing on young people, women, rural populations and people with disabilities. In cooperation with the established coordination bodies, UNFPA will select partners based on their strategic position and ability to deliver high-quality programmes, monitor their performance and ensure the implementation of audit recommendations.

23. The programme partnership plan 2016-2020 considers the middle-income country context, UNFPA business model, and the governance system of Armenia in various partnership modalities. UNFPA will continue to work with the government and potential donors to promote contraceptive security. The programme will be gradually phased out in those areas where a strong national ownership exists, such as family planning and comprehensive sexuality education.

24. UNFPA, the Government and partner organisations are committed to delivering the expected results of the programme; accountability will be enhanced by regularly undertaking joint participatory reviews, monitoring and evaluation of programme implementation. The country office will perform a final evaluation of the third programme cycle in 2019.

25. UNFPA will seek additional resources from international and bilateral donors, and will proactively participate in joint initiatives in the programme focus areas. Potential sources of funding include country co-financing mechanisms, the private sector, the Armenian diaspora and emerging donors. The country office will continue to leverage resources from the Government and other partners.

26. In line with the new business model, the UNFPA country office will consist of a non-resident UNFPA country director, an assistant representative, three national programme analysts and several support staff. Given the new focus on upstream engagement, the country office will adjust the profile of its staff to be able to advance the UNFPA agenda through partnerships, negotiations, communications and other skills associated with advocacy and policy advice. The country office staff will be funded from the integrated institutional and programme budgets of UNFPA. The country programme will utilize the technical and programmatic support from UNFPA headquarters and the regional office.

RESULTS AND RESOURCES FRAMEWORK FOR ARMENIA (2016-2020)

National priority: Enhancing promotion of health and prevention of diseases
UNDAF outcome: By 2020, quality health services are accessible to all, including especially vulnerable groups
Indicator: Prevalence of modern contraceptive methods among women (15-49). *Baseline: 27%; Target: 32%*

UNFPA strategic plan outcome	Country programme outputs	Output indicators, baselines and targets	Partners	Indicative resources
Outcome 1: Sexual and reproductive health Increased availability and use of integrated sexual and reproductive health services, including family planning, maternal health and HIV, that are gender-responsive and meet human rights standards for quality of care and equity in access Outcome indicator(s): • Modern contraceptive prevalence rate among the poorest quintile women of reproductive age *Baseline: 21%; Target: 25%* • Proportion of demand for contraception satisfied *Baseline: 79; Target: 82*	Output 1: Increased capacity of national institutions to develop evidence-based policies and implementation mechanisms for high-quality integrated sexual and reproductive health services for women, adolescents and youth, with focus on vulnerable groups, including in humanitarian settings	• Number of evidence-based policies, guidelines and protocols to enhance universal access of reproductive health, including vulnerable groups adopted *Baseline: 7; Target: 15* • Number of new users of modern contraceptive methods among socially vulnerable population *Baseline: to be set by end-2015; Target: 15% increase* • Number of regions that have capacity to implement MISP at the onset of a crisis *Baseline: 0; Target: 5* • Family planning logistics system is established by end-2017 *Baseline: No; Target: Yes*	Ministries of health, education, defence, and emergency situations; Republican Institute for Reproductive Health; State Medical University; donors; United Nations organizations; civil society; the media	$1.05 million ($0.55 million from regular resources and $0.5 million from other resources)

National priority: Improved reproductive health status, especially for young people, through increased access to high-quality services **UNDAF outcome:** By 2020, vulnerable groups have improved access to basic education and social protection services and participate in their communities **Indicator**: Percentage of schools delivering quality life-skills education and have adequately trained and resourced teachers. *Baseline: 45; Target: 90*				
Outcome 2: Adolescents and youth Increased priority on adolescents, especially on very young adolescent girls, in national development policies and programmes, particularly increased availability of comprehensive sexuality education and sexual and reproductive health Outcome indicator(s): • Number of policies and programmes in place addressing sexual and reproductive health needs of youth and adolescents, including marginalized youth *Baseline: 2; Target: 4*	Output 1: Strengthened national laws, policies and programmes for incorporating adolescent and youth rights and needs through evidence-based policy advocacy	• Number of guidelines, protocols and standards for health care workers for the delivery of quality sexual and reproductive health services for adolescents and youth adopted *Baseline: 0; Target: 3* • Teaching content and methodology of healthy lifestyle education is revised in line with international standards *Baseline: No; Target: Yes* • Number of participatory platforms that advocate for increased investments in marginalized adolescents and youth *Baseline: 2; Target: 4*	Ministries of youth, health, education, labour and social issues; Institute of Education; youth groups; Youth Peer Education Network; civil society; United Nations organizations; World Vision; the media; the private sector	$0.6 million ($0.3 million from regular resources and $0.3 million from other resources)
National priority: Enhance gender equality, reducing gender-based violence **UNDAF outcome:** By 2020, Armenia has achieved greater progress in reducing gender inequality and gender-based violence and in promoting women's empowerment **Indicator:** Global Gender Gap Index score *Baseline: 103;Target: 96*				
Outcome 3: Gender equality and women's empowerment Advanced gender equality, women's and girls' empowerment, and reproductive rights, including for the most vulnerable and marginalized women, adolescents and youth Outcome indicator(s): • Percentage of Universal Periodic Review recommendations, issued in the second report, implemented, compared to the first report. *Baseline: 0%; Target: 50%*	Output 1: Strengthened capacity of national institutions on policy development and implementation to promote gender equality and prevent harmful practices	• Number of analytical studies to establish evidence on effects of gender inequality and gender-based violence conducted to guide policy *Baseline: 1; Target: 3* • Number of new policies addressing gender inequality, gender-based violence and gender-biased sex selection are developed *Baseline: 1; Target: 3* • Number of public campaigns addressing gender equality, non-discrimination and gender-based violence and gender-biased sex selection, including through engagement of men and boys *Baseline: 10; Target: 15*	Parliament, Ministries of health, labour and social issues; National Statistical Service; Ombudsman; civil society; faith-based organizations; United Nations organizations; donors; the private sector; the media	$0.9 million ($0.4 million from regular resources and $0.5 million from other resources)

National priority: Population data available for evidence-based sustainable development **UNDAF outcome:** By 2020, systems for democratic governance and the protection of human rights are strengthened **Indicator:** Number of new or amended policies, regulations and policy implementation mechanisms established that are evidence based and in line with international standards (in anti-corruption, human rights, population development and open government fields) *Baseline: 3; Target: 6*				
Outcome 4: Population dynamics Strengthened national policies and international development agendas through integration of evidence-based analysis on population dynamics and their links to sustainable development, sexual and reproductive health and reproductive rights, HIV and gender equality Outcome indicator(s): • Number of new national development plans that address population dynamics by accounting for population trends and projections in setting development targets. *Baseline: 3; Target: 5*	Output 1: Increased availability of evidence for formulation of right-based policies on emerging population issues (low fertility, ageing, migration) and their linkages to sustainable development	• Number of analytical reports and secondary data analysis addressing population dynamics taking into account population trends and projections for setting development agenda *Baseline: 17; Target: 29* • Number of databases with population-based data accessible by users through web-based platforms that facilitate mapping of socio-economic and demographic inequalities. *Baseline: 1; Target: 4* • The national authorities have institutional capacity to analyse and use disaggregated data on (a) adolescents and youth, and (b) gender-based violence *Baseline: (a) No, (b) No; Target (a) Yes (b) Yes*	Ministry of Labour and Social Affairs; National Statistical and Migration Services; National Institute of Labour; Parliament; civil society; United Nations organizations; donors; the media	$0.75 million ($0.45 million from regular resources and $0.3 million from other resources) Total for programme coordination and assistance: $0.3 million from regular resources